NAME OF COMMITTEE (In Full)

[Electronically Filed]

Lambe, Rebecca, , ,

Signature

SMP

Check if

SCHEDULE E (FEC Form ITEMIZED INDEPENDENT EXPE

MIZED INDEPENDENT EXPENDITURES					PAGE 1234	
ME OF COMMITTEE (In Full)						4 OF FORM 3X
ле ос					IDENTIFICATI	ON NUMBER ▼
				C	C00484642	
ck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed	on M M	/ D D /	Y Y Y Y
Full Name of Payee Kyle Oppenheimer * Memo Item				Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 171 Morningside Ave				10	.0	2010
Apt 3B				Amount		
ity State Zip Code						1301.12
New York	NY	10027-4398		Transaction ID : 500051870 Date of Disbursement or Obligation		
Purpose of Expenditure Media Production Costs - Estimate Category/ Type				M = M	/ D D /	YYYY
Name of Federal Candidate:		Support	Office	Sought:	House	District:
Rosendale, Matt, , ,		Oppose		President	✗ Senate	State: MT
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1412145.73	Disbu 2018	Other (Primary	General
Full Name of Payee		Memo	Item		olic Distribution	/Dissemination
MVAR Media, LLC				M M	/ D D /	YYYY
Mailing Address				10	09	2018
1199 N Famax St				Amount		
Ste 220 City	State	Zip Code				5537.00
Alexandria	VA	22314-1437		Transactio	n ID : 5000511 bursement or C	00
Purpose of Expenditure Media Production Costs		Category/ Type		M M M 10	/ 12 /	2018
Name of Federal Candidate:						
		Support	Office	Sought:	House	District:
Cramer, Kevin, , ,		x Oppose		President	✗ Senate	State: ND
2570649 96				irsement For:	Primary	x General
Per Election for Office Sought	7 7	2370040.00	2018	Other (specify) ►	
a) SUBTOTAL of Itemized Independent Expenditures			•			5537.00
b) SUBTOTAL of Unitemized Independent Expenditure	res		. •			
c) TOTAL Independent Expenditures			•			
Inder penalty of perjury I certify that the independentith, or at the request or suggestion of, any candidative committee) any political party committee or its	ate or authorize					

2018

25

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Date